

MyPhysicianPlan is an innovative and intelligent platform that enables healthcare options that are not available through health insurance. Members typically save more than 50% of their overall healthcare costs, including monthly payments. MyPhysicianPlan offers alternative health care options, including Primary Care Plan (PCP) and Flexible US Care (Flex Care) to businesses and part-time/full-time employees or contractors or individuals.

Primary Care Plan:

Primary Care Plan enables members have access to a Primary Care Physician for routine medical care. Members can rely on their Primary Care Physician to coordinate their care, including annual checkups, sick visits, treat chronic conditions, maintain medical records, and coordinate with other healthcare providers.

Flexible US Care:

Flexible US Care (Flex Care) includes both the Primary Care Plan and a complimentary membership to Sedera¹ for other healthcare services. Flexible US Care is available in 45 states (excluding: CA, PA, WA, VT, and NM). Flexible US Care is a total healthcare solution.

Primary care coverage for routine medical care is available through Primary Care Plan membership and all other healthcare services, including larger and unexpected medical needs are paid through complementary Sedera membership. Members choose a desirable Initial Unshareable Amount (IUA) at the time of enrollment. IUA is the limit up to which the member is responsible to pay out of pocket for each incident (health episode). Member guidelines to understand all benefits related to non-primary care services (specialists, hospitals, etc.), including utilizing free services like colonoscopy, mammograms, etc. will be provided to each member. Benefits include, free services like colonoscopy, mammograms, free 2nd opinion, 24/7 telehealth and member services helpline.

1. Sedera is a nonprofit Medical Cost Sharing Community that offers a non-insurance approach for managing large and unexpected medical expenses through direct Member-to-Member sharing. Sedera Members belong to a community of individuals who are active and engaged participants in their healthcare decision-making, dedicated to a healthy lifestyle, and united by shared values. The Sedera Medical Cost Sharing Community meets the legal definition of a health care sharing ministry in a number of states that recognize HCSMs.

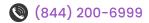




Member Plans Questions

Important Questions	Answers	Why It matters
Who can enroll for the plan?	Anyone can self-enroll or through a business organization, without any restrictions or eligibility requirements. PCP coverage begins on elected start date. Flex Care coverage begins on the 1st of the month.	This removes any restrictions for all people to enroll and seek healthcare. No waiting periods, No eligibility requirements like full time or time restrictions to enroll.
What services are eligible?	Primary Care Plan (PCP): All primary care services, including annual physical (including lab test), sick visits, follow-ups, chronic care, care-coordination and 24/7 on call when necessary. Flexible US Care (Flex Care): Everything with PCP plan + Sedera membership. No network restrictions. No annual or lifetime caps. Expert second opinion, high-cost routine diagnostic procedures of screening colonoscopy, mammogram, and annual flu vaccines.	Primary Care Plan: Following the 4Cs - first contact, continuity, coordination and comprehensiveness, ensures optimal health. Flexible US Care: Freedom of choice to select any specialist, hospital or healthcare provider of their choice. Members save more than 50% in monthly payments and out of pocket costs.
What is the copay?	PCP: \$35 for in-person visit, \$25 for tele-visit. There is no copay for one annual preventive exam per year. Flex Care: All medical expenses are applicable to Flex Care.	A low copay ensures that patients keep their appointments and get care when they need it.
Is there a deductible to be met?	PCP: There is no deductible, the patient only pays the copay for every visit. Flex Care: Member is responsible for IUA.	PCP: High deductible plans are burdensome to the members and dissuade members from seeking timely care and add excessive out of pocket costs. Flex Care: Manage your care the way it should be and not be trapped by insurance rules.







How are lab tests paid for?	PCP: One free annual lab exam included. Members are billed and pay 20% of the lab tests fees after plan adjustments/discount. Flex Care: All medical lab tests are applicable to the Flex Care.	Low fees improve access and compliance which ensures better diagnosis.
How are prescriptions paid for?	PCP: Patients pay a negotiated out of pocket payment at local pharmacies nationwide. Flex Care: All medical expenses are applicable to Flex Care.	Most generics are much cheaper than \$10 and reduces chances of unfilled prescriptions – cheaper than most alternative options.
How are Urgent Care & ER visits handled?	PCP: Urgent care & ER visits are not covered. However, members can contact their PCP first, including after hours, prior to seeking emergency care. Flex Care: There are no restrictions. Members can visit any urgent care or ER of their choice.	PCP's provide convenience and help avoid unnecessary or excessive charges.
What about hospital visits? PCP: Patients pay out of pocket charges for hospital visits. PCPs coordinate with hospitals and share medical records. Flex Care: Members can visit any hospital of choice.		Hospitals get case history and medical records to better care for the patients. PCPs follow-up with the patients post discharge. No prior approval or restrictions to visit hospitals in a specific network.
Are there restrictions for preexisting conditions?	PCP: No limitations Flex Care: Members are eligible to seek care from any provider, but limitations for payments apply to pre-existing conditions for which symptoms and/or treatment existed within 36 months prior to membership. Year 1: Member is fully responsible Year 2: A \$15,000 limit for condition Year 3: A \$30,000 limit for condition Year 4: Condition eligible for full payment	Clear and transparent understanding helps members to manage their care better.





Health Insurance vs MyPhysicianPlan

	Health Insurance Silver Plan (\$5000 Deductible)	MyPhysicianPlan (\$1000 IUA)
Doctor Visit 1: Annual physical	\$ -	\$ -
Doctor Visit 2: PCP sick visit 1	\$150	\$35
Doctor Visit 3: PCP chronic visit	\$150	\$35
Annual Medications	\$80	\$80
Specialist Visit	\$250	\$250 (IUA)
Surgery (Following specialist follow-up)	\$2,100	\$750 (IUA)
Out of Pocket (Full Year)	\$2,730	\$1,150
Annual Plan Costs	\$6,216	\$3,036
Total	\$8,946	\$4,186

Note: Price comparison is for reference only. Actual prices may vary based on the plan and services.

Member Use Cases

Flexible US Care with \$1000 IUA

Example 1: Primary Care Visits – One Year

Member with hypertension, 1 annual visit + quarterly visit to adjust medications.

Annual Physical :	Free
Annual Lab Panel :	Free
Chronic visits every quarter (3 x member pays \$35 copay):	\$105
3 Lab tests for cholesterol (\$20.08 x 3):	\$60.24
Prescriptions (use MyPhysicianCard card to get up to 90%):	\$36
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otal Member Out of Pocket Fees/Copay:

\$201.24





Example 2: Primary Care Visits – One Year

Healthy Member, 1 annual visit + 1 sick visit

Annual Physical:	Free
Annual Lab Panel:	Free
Sick visits (member pays \$35 copay):	\$35
Prescriptions (use MyPhysicianCard card to get upto 90% savings):	\$6.00
Total Member Out of Pocket Fees/Copay:	\$41.00

Example 3: Urgent Care Center – Broken Arm

Member breaks arm falling off step stool at home and goes to local emergency facility.

ER Visit (cash pay price):	\$2,000
X-rays (cash pay price):	\$100
Follow up office visits (non-primary care visit):	\$200
Prescriptions (use MyPhysicianCard card to get upto 90% savings):	\$34
Sedera payment:	\$1,334
Total Member Out of Pocket Fees/Copay (IUA):	\$1,000

Example 4: Heart Attack

Member has a heart attack at home and is taken to the ER by ambulance. Member spends 5 days in the hospital and receives: EKG, surgery and post-surgery physical therapy. Doctor prescribes prescriptions for maintenance.

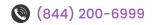
Hospital visit:	\$54,600
Anesthesia and Surgery:	\$22,000
Prescriptions, first 120 days (use MyPhysicianCard card to get upto 90% savings):	\$425
Follow up visits:	\$400
Sedera payment:	\$76,425
Total Member Out of Pocket Fees/Copay (IUA):	\$1,000

Example 5: Sprained Ankle

Member sprains ankle playing soccer and goes to their Primary Care physician facility to make sure it is not seriously injured.

PCP visit (\$150 in value, member pay, \$35 copay):	\$35
Ankle brace:	\$25
Total Member Out of Pocket Fees/Copay:	\$60







Monthly Payment

Initial Unshareable Amount (IUA) is the limit up to which the member is responsible to pay out of pocket for each incident (health episode).

Primary Care Plan: \$75 per person/per month, for all ages, no limitations, no restrictions.

Flexible US Care (Primary Care + Other Medical Care Services) – Total Healthcare Solution:

\$500 Initial Unshareable Amount (IUA)					
Age	18-29 Years	30-39 Years	40-49 Years	50-59 Years	60-64 Years
Member Only	\$342	\$429	\$429	\$488	\$730
Member + Spouse	\$700	\$847	\$847	\$889	\$1,377
Member + 1 Child*	\$638	\$787	\$787	\$853	\$1,314
Member + Spouse + 1 Child*	\$1,000	\$1,203	\$1,203	\$1,255	\$1,964

^{*} plus \$75 per month for each additional child

Recommended

\$1,000 Initial Unshareable Amount (IUA)					
18-29 Years	30-39 Years	40-49 Years	50-59 Years	60-64 Years	
\$328	\$372	\$387	\$440	\$649	
\$596	\$656	\$682	\$795	\$1,215	
\$559	\$641	\$664	\$764	\$1,161	
\$846	\$934	\$964	\$1,120	\$1,729	
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^{*} plus \$75 per month for each additional child

\$1,500 Initial Unshareable Amount (IUA)						
Age	18-29 Years	30-39 Years	40-49 Years	50-59 Years	60-64 Years	
Member Only	\$307	\$348	\$363	\$416	\$612	
Member + Spouse	\$538	\$608	\$627	\$746	\$1,147	
Member + 1 Child*	\$521	\$594	\$617	\$718	\$1,094	
Member + Spouse + 1 Child*	\$786	\$864	\$894	\$1,052	\$1,628	

^{*} plus \$75 per month for each additional child

\$2,500 Initial Unshareable Amount (IUA)					
Age	18-29 Years	30-39 Years	40-49 Years	50-59 Years	60-64 Years
Member Only	\$287	\$311	\$333	\$389	\$570
Member + Spouse	\$503	\$569	\$576	\$692	\$1,057
Member + 1 Child*	\$484	\$541	\$564	\$664	\$1,010
Member + Spouse + 1 Child*	\$727	\$811	\$814	\$970	\$1,503

^{*} plus \$75 per month for each additional child

\$5,000 Initial Unshareable Amount (IUA)					
Age	18-29 Years	30-39 Years	40-49 Years	50-59 Years	60-64 Years
Member Only	\$265	\$298	\$310	\$333	\$489
Member + Spouse	\$475	\$543	\$543	\$590	\$895
Member + 1 Child*	\$458	\$519	\$519	\$568	\$858
Member + Spouse + 1 Child*	\$687	\$771	\$771	\$824	\$1,261

^{*} plus \$75 per month for each additional child

Prices may vary depending on membership elections. Please see Membership Guidelines for full sharing rules. May not be available in all states. No representations or warranties that every or all memberships include any add-on/additional product(s).

Medical Cost Sharing Households with one or more Tobacco/Vape Users contribute an additional \$75.00 per month. All Tobacco/Vape Users over the age of 50 have a \$25,000 per Need sharing limit for Cancer, Respiratory disease, Vascular disease including coronary disease and stroke, Oral and Esophageal disease and Gastric and Duodenal Ulcers. See Section 8 and the Appendix of the applicable Sedera Guidelines for additional details.